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APPLICANTS

Fusao Ishii, Menlo Park, CA;

Fumitomo Hide, San Jose, CA;

*** CONTINUING DATA ***** *T.T.* **NONE**

*** FOREIGN APPLICATIONS ***** *T.T.* **NONE**

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 04/29/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 22	TOTAL CLAIMS 61	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>T.T.</i>				
Verified and Acknowledged Examiner's Signature	Initials			

ADDRESS

Fusao Ishii
 350 Sharon Park Drive, G26
 Menlo Park, CA
 94025

TITLE

Micromirrors with support walls

FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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